INTERNSHIP APPLICATION



U.S. SENATOR HILLARY RODHAM CLINTON

INTERNSHIPS IN THE OFFICE OF SENATOR CLINTON

Senator Clinton's internship program provides an excellent opportunity for students to learn and serve through first-hand participation in government service, and the legislative process. The program is intended to provide knowledge, tools, skills, and experiences that an intern will readily apply to future challenges and professional pursuits. We expect a great deal from our interns. Candidates will have a diverse, challenging experience and make a genuine contribution to Senator Clinton's work on behalf of New York and the nation.

We welcome all applicants who have demonstrated academic excellence and have displayed a commitment to public service. While preference is given to New York residents, students from all backgrounds are encouraged to apply.

THE APPLICATION PROCESS

Please complete all sections of the application thoroughly. Although providing the information requested is voluntary, failure to provide complete answers may affect the review and consideration of your application.

Your application must include all of the following in order to be considered:	
	Internship Application Form (attached)
	Current Resume
	One page statement of intent describing why you want to be an intern in the Office of
	Senator Clinton
	Writing sample (The topic should relate to your major, personal history, or current
	events, and be 500 words or less. A paper excerpt with the thesis clearly stated is
	acceptable).
	Two letters of recommendation (photocopies are fine)
	An unofficial transcript

The application and all requested materials must be submitted together.

Please keep a photocopy of your completed application for your files. Given the volume of incoming applications, we will not be able to return any of the materials we receive.

Failure to meet any of the above-mentioned requirements may delay, or even prevent, the review of your application.

FAX COMPLETE APPLICATIONS TO:

Candidates should submit an application to the office where they wish to intern by facsimile. Contact information for each of Senator Clinton's offices is shown below:

New York City Office

Office of Senator Hillary Rodham Clinton Attn: Intern Coordinator Tel. (212) 688-6262, Fax (212) 688-7444

Albany/Capital District

Office of Senator Hillary Rodham Clinton Attn: Intern Coordinator Leo W. O'Brien Federal Office Building 1 Clinton Square, Rm 821 Albany, NY 12207 Tel. (518) 431-0120, Fax (518) 431-0128

Buffalo Office

Office of Senator Hillary Rodham Clinton Attn: Intern Coordinator Guaranty Building Suite 208, 28 Church Street Buffalo, NY 14202 Tel. (716) 854-9725, Fax (716) 854-9731

Syracuse/Central New York Office

Office of Senator Hillary Rodham Clinton Attn: Intern Coordinator 100 South Clinton Street, Room 111 PO Box 7378 Syracuse, NY 13261 Tel. (315) 448-0470, Fax (315) 448-0476

Long Island Regional Office

Office of Senator Hillary Rodham Clinton Attn: Intern Coordinator 155 Pinelawn Road, Suite 250 North Melville, NY 11747 Tel. (631) 249-2825, Fax (631) 219-2847

Rochester Office

Office of Senator Hillary Rodham Clinton Attn: Intern Coordinator 100 State Street, Room 3280 Rochester, NY 14614 Tel. (716) 263-6250, Fax (716) 263-6247

Washington, DC Office

Office of Senator Hillary Rodham Clinton Attn: Intern Coordinator Tel. (202) 224-4451, Fax (202) 228-0282

SESSION DATES AND APPLICATION DEADLINES:

Fall Session 2005 (September 5 – December 16), Application Deadline: July 29, 2005 Spring Session 2006 (January 3 – May 12), Application Deadline: October 28, 2005 Summer Session 2006 (May 22 – August 18), Application Deadline: March 17, 2006

Interns are expected commit to at least 15 hours per week.

Applications must be postmarked by the deadline date for each session. Notification about the status of your application will be mailed to you.

FUNDING

Please note that all internships are unpaid. However, candidates are permitted under Senate rules to apply for and accept financial assistance from appropriate outside sources. Nonetheless, Senate rules require that receiving financial assistance from outside sources does not create a conflict of interest with your Senate work. Please indicate in the space provided on the application if you plan to receive funding from an outside source.

ACADEMIC CREDIT

Awarding academic credit for an internship is at the discretion of your high school, college or university. However, we will assist you in providing appropriate information as requested by your school. Arrangements for accreditation should be made before you begin the internship.

SENATOR HILLARY RODHAM CLINTON -- INTERNSHIP APPLICATION FORM

PLEASE TYPE OR PRINT LEGIBLY Please check the session for which you are applying: Spring 2006 Session____ Summer 2006 Session _____ Fall 2005 Session (September 5 – December 16) (January 3 – May 12) (May 22 – August 18) Please indicate if your start/end dates would vary from those listed above: As best you can, please list on what days and at what times you are available: Monday: Tuesday: Wednesday: Thursday: Friday: Note: Interns are expected to make a commitment of at least 15 hours per week. PERSONAL INFORMATION _____ Today's Date: _____ Full Name: Last First Middle Initial Social Security #: _____ - ____ Place of Birth: ____ City State U.S. Citizenship: yes _____ no ____ Current Address: Permanent Address: Email: _____ Current Phone: Home Phone: Are you a registered voter? yes ____ no ____ If yes, in what state _____ Prior Campaign/Political/Government Experience: Areas of Interest:

How did you hear about Senator Clinton's internship program?
Have you applied to the internship program before? If so, which office/session?
Are you receiving, or do you plan to receive funding (scholarships, grants, etc.) during the course of your internship? If so, from what source?
ACADEMIC INFORMATION
College/University/High School:
School's Address:
Select One: High School Undergraduate Graduate/Law Not presently a student
Year of Graduation: GPA: Major:
SECURITY QUESTIONS
Have any disciplinary or administrative actions (i.e. probation, suspension, expulsion) been taken against you by your school or are any pending? yes no
Have you ever been charged with or convicted of any criminal offense, DWI or misdemeanor offense yes no
Have you ever used, possessed, supplied or manufactured any illegal drugs? yes no
If you answered "Yes" to any questions mentioned above, please explain and include the dates of the actions on a separate page.
CERTIFICATION
My statements on this form, and any attachments to it, are true, complete, and correct to the best of m knowledge and belief and are made in good faith. I understand that knowingly false answers will lead to the rejection of my application or immediate dismissal from the program.
Signature Date